

Preparing Nurses for Primary Health

Care Roles: Barriers and enablers to the successful transition of next generation nurses into the primary health care environment

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Thesis submitted in fulfilment of the requirements for the degree of

Doctor of Philosophy

under the supervision of Professor Patricia Mary Davidson

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Certificate of Authorship

I, Pauline Gilda Murray-Parahi declare that this thesis is submitted in fulfilment of the requirements for the award of Doctor Of Philosophy, in the Faculty of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise reference or acknowledged.

In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution.

This research is supported by the Australian Government Research Training Program

Signature

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Whakamanatanga

(Dedication)

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Thesis Format

The format of this thesis described in Chapter 1: Introduction outlines a thesis by compilation, formatted as a single manuscript and comprising of a combination of chapters and published/publishable works (i.e., papers). This thesis contains ten chapters, two present published articles and four publishable papers arising from six phases and five discrete studies. The remaining chapters included an introduction, methods, discussion and conclusion.

Publications & Conferences

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<http://onlinelibrary.wiley.com/doi/10.1111/inr.12305/full>

**The above publication was written during my Candidature but was not part of this thesis*

- **Murray-Parahi, P.**, DiGiacomo, M., Jackson, D., & Davidson, P. M. (2016). New graduate registered nurse transition into primary health care roles: an integrative literature review. Journal of Clinical Nursing, 25(21-22), 3084-3101. doi:10.1111/jocn.13297
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Abstract

Background

Advances in medical knowledge and surgical procedures have resulted in people living longer with chronic disease or discharged earlier from hospital following surgery. An increasing expectation of quality health care and provision of services where people work and live requires a practice ready and sustainable primary health care [PHC] nursing workforce. However, preparing nurses for these roles is challenging when the emphasis of undergraduate education is acute care focused and exposure to authentic community nursing roles is limited.

Aim

The aim of this research was to explore experiences of new graduate nurse [NGN] transition and their preparation for PHC roles.

Methods

A six-phase convergent mixed methods research design used qualitative and quantitative arising data from five discrete studies. These studies employed various techniques to explore and examine the phenomena of NGN transition to practice in the community nurse role. Data were analysed individually then converged in Phase IV an anchor point from which to identify barriers and enablers of transition and to develop and refine the products of research following stakeholder feedback.

Results

There was no consensus found in the literature about transition models or best practice guidelines for transition programs in either the acute or PHC setting. Online curricula artifacts ($n=694$) from 29 Australian nursing schools were analysed revealing an acute care focus with minimal [2%] explicit PHC content and limited exposure to authentic roles. Experiences of 54 participants arising from studies, 3) interviews, 4) expert panel/ Delphi survey and 5) focus groups were used to triangulate data, highlight barriers and enablers to NGN transition and validated the products of research.

Discussion

This research produced a model of transition and expert consensus, and best practice guideline framework for NGN transition in PHC validated by stakeholders. Findings also challenged long-held assumptions that only experienced nurses can work in PHC roles or whether acute care hospital experience is necessary for skills consolidation.

Conclusion

This study has cast a spotlight on an area of nursing that is of critical importance. As we grapple a rising burden of chronic illness across the life span, the role of community nurses are increasingly important. A future workforce reflective of this shift in care requires critical attention in policy, practice, education and research.

Glossary

In a complex health care environment, terminology used to describe nursing roles and nomenclature can be confusing. A glossary of key terms is sometimes helpful to differentiate between roles but there is much overlap in nursing roles occurring the community. In Australia nurses who work in the community or primary health care [PHC] setting are collectively referred to as the PHC nursing workforce (Department of Health, 2017). While the simplest understanding of community nursing is a nursing role which takes place outside the hospital or institutional setting. Community nursing is not only defined by setting but also by the aims of the services provided and the underlying philosophies that guide their practice (St John & Keleher, 2007). This research project focused on community nurses from two large metropolitan local health districts in New South Wales, Australia who predominantly practice in the home setting.

Community Health Nurse*

The terms 'community health nursing' and 'public health nursing' [PHN] are sometimes used interchangeably in the literature. CHN focuses on high risk or vulnerable populations and the entire community (St John & Keleher, 2007).

Community health nursing [CHN] is an umbrella term that covers a number of specialties and roles of nurses who work in and with the community (Stanhope, 2016).

The World Health Organization [WHO] defines CHNs as,

A special field of nursing that combines the skills of nursing public health and some phases of social assistance and functions as part of the total public health programme for the promotion of health, the improvement of the conditions in the social and physical environment, rehabilitation of illness and disability (2017, p 5).

Community Nurse

Registered or enrolled nurse who work in the community setting, but often in the home setting. Community nurses, tend to be employed within the public health system although may also work in the private sector under various nomenclature.

District Nurse

Like community nursing, district nurses visit and treat patients in their homes. They operate in a specific area or in association with a particular general practice surgery or health centre. The role originated in the UK (Rathbone, 1890) and later introduced to Australia in the late 1800's (Bessant, 1999).

Early Career Nurse	Early career nurse refers to the first 5 years of postgraduate nursing practice.
Generalist Community Nurse	Generalist community nurses [GCN] was the term used to describe a community nurse with generalist skills. The role existed prior to specialisation or differentiation into discrete nursing skills and incorporated a number of nursing roles in the community including school health, early childhood/baby clinics, health promotion, disease prevention, immunization and home nursing. There has been some debate about the advantages of generalist or specialist community nursing roles.
New Graduate Nurse	A new professional nurse recently graduated from an approved course of study in university, within their first year of practice as a registered nurse.
Next Generation Nurses	The term refers to undergraduate nursing students or new graduate nurses – although this may include potential nursing student candidates, in this research it mainly refer to the next (future) or new (current) generation of nurses.
Practice Nurse	Practice nurses [PN] are part of the PHC nursing workforce within Australia and provide primary care. They work alongside GPs in the private sector employed by general practices.
Primary Care	Primary care is the first point of contact for health care in the health system. In Australia, the term primary care refers to care provided by general practitioners [GPs] and practice nurses within a general practice facility. While they vary in philosophy, the terms primary care and PHC are often used interchangeably, although primary care generally provides selective rather than comprehensive PHC.
Primary Health Care	<p>In the early 1970s, the most commonly used model in health care focused on a biomedical model, or treatment and cure in institutions. Then a shift in thinking toward population health promotion and factors influencing health, such as lifestyle occurred. The term primary health care first gained wide recognition when ten declarative statements were proclaimed at the WHO international Conference in Alma Ata, Russia in 1978 (World Health Organization, 1978)</p> <p>PHC offered a new definition of health that focused on wellness rather than just the absence of disease, providing a holistic notion of health care that included access, equity, social justice and human rights. PHC offered a whole of society approach to health care and incorporated an inclusive philosophy of care. This was a stark departure from the traditional medical model and more aligned to nursing philosophy.</p>

Registered Nurse	<i>Registered nurse [RN] is a person who has completed the prescribed education preparation, demonstrates competence to practice and registered under the Health Practitioner Regulation National Law as a registered nurse in Australia (Nursing and Midwifery Board of Australia, 2016).</i>
Transition to Practice	Transition to practice [TTP] or transition to professional practice, refers to the first year of professional practice as a registered nurse (see NGN). The process of transition involves change over time (Chick & Meleis, 1986; Kralik et al., 2006).
Transition to Practice Program	<p>Transition to practice program [TPP or TTPP] refers to organisational-based programs that provide some level of support to newly graduated nurses over the course of the first 12 months of RN practice in order to ease the process of transition to professional nursing practice.</p> <p>Programs can vary in length and quality depending on location and available resources but generally include some sort of orientation, education and preceptorship. In some countries, these programs may be also refer to as residency programs although residency implies an apprenticeship-type program occurring before graduation. Residency programs have been a feature of postgraduate medical education and training for many years.</p>

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